

PART B - FEE(S) TRANSMITTAL

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52835 7590 11/16/2009

HAMRE, SCHUMANN, MUELLER & LARSON, P.C.
 P.O. BOX 2902
 MINNEAPOLIS, MN 55402-0902

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 I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Mele Kaufman (Depositor's name)
 Mele Kaufman (Signature)
 December 10, 2009 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/581,732	09/06/2006	Shigeki Kawarabata	10873.1912USWO	8677
TITLE OF INVENTION: EXTRACORPOREAL BLOOD CIRCULATING APPARATUS, CLOSED-TYPE VENOUS RESERVOIR AND EXTRACORPOREAL BLOOD CIRCULATING METHOD				

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0	\$1810	02/16/2010
EXAMINER		ART UNIT	CLASS-SUBCLASS	12/11/2009 EAREGAY2 00000003 503478 18581732		
DEAK, LESLIE R		3761	604-008000	01 FC:1501	1510.00 DA	
				02 FC:1504	300.00 DA	

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

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- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

- 1 Hamre, Schumann,
 2 Mueller & Larson, P.C.
 3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 1.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

JMS CO., LTD.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Hiroshima, Japan

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

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- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Typed or printed name Douglas P. Mueller

Date December 10, 2009

Registration No. 30,300

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